

Application Data Sheet

Application Information

Application number::	Not yet assigned
Filing Date::	Herewith
Application Type::	Regular
Subject Matter::	Utility
CD-ROM or CD-R?::	None
Title::	Anastomotic Leg Arrangement
Attorney Docket Number::	088/04467
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	5A
Total Drawing Sheets::	23
Small Entity?::	Yes
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	<u>Israel</u>
Status::	Full capacity
Given Name::	<u>Amir</u>
Family Name::	<u>Loshakove</u>
City of Residence::	<u>Moshav-Bazra</u> ILX
Country of Residence::	Israel
Street of mailing address::	PO Box 378
City of mailing address::	Moshav-Bazra
Country of mailing address::	Israel
Postal or Zip Code of mailing address::	60944

2 - ∞
Applicant Authority Type:: Inventor
Primary Citizenship Country:: Israel
Status:: Full capacity
Given Name:: Ofer
Family Name:: Nativ
City of Residence:: Rishon-Lezion I L X.
Country of Residence:: Israel
Street of mailing address:: 11 Hamaayan Street
City of mailing address:: Rishon-Lezion
Country of mailing address:: Israel
Postal or Zip Code of mailing address:: 75210

3 - ∞
Applicant Authority Type:: Inventor
Primary Citizenship Country:: Israel
Status:: Full capacity
Given Name:: Ido
Family Name:: Kilemnik
City of Residence:: Herzelia I L X
Country of Residence:: Israel
Street of mailing address:: 35 Nordau Street
City of mailing address:: Herzelia
Country of mailing address:: Israel
Postal or Zip Code of mailing address:: 46585

4 - ∞
Applicant Authority Type:: Inventor
Primary Citizenship Country:: Israel
Status:: Full capacity
Given Name:: Gil
Family Name:: Hefer
City of Residence:: Kfar-Saba I L X.
Country of Residence:: Israel

Street of mailing address:: 8/8 Herzfeld Street
City of mailing address:: Kfar Saba
Country of mailing address:: Israel
Postal or Zip Code of mailing address:: 44415

Correspondence Information

Correspondence Customer Number :: 44909

Representative Information

Representative Customer Number::	44909	
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Domestic Priority Information

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/IL2003/000769	09/25/03
PCT/IL2003/000769	Continuation-in-part of	10/809,274	03/25/04
10/809,274	Continuation of	PCT/IL2002/000790	09/25/02
PCT/IL2002/000790	An application claiming the benefit under 35 USC 119(e)	60/426,013	11/14/02

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::
WO (World Intellectual Property Organization)	PCT/IL2002/000790	09/25/02	Yes

Assignee Information

Assignee name:: By-Pass, Inc.
Street of mailing address:: 40 Ramland Road
City of mailing address:: Orangeburg
State or Province of mailing address:: NY
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 10962